SRF Disbursement Request Form														
Participant Infor	mation													
Name: City of West Lafayette SRI					SRF Loa	SRF Loan Number:			WW 12792206					
DUNS Number:	04 455 2636			CCR Nu	mber:	6NKJ2				Reques	t Numbei	:	53	
Mailing Address:	711 West Nav	ajo Street			***************************************							I		
City: West Lafa	yette			State:	IN					ZIP	479	06		
Contact Person: Judith C. Rhodes, Clerk-Treasurer Contact Phone Number: 765-775-5150														
Authorized Representative: Mayor John R. Dennis, or C-T J. Rhodes Authorized Representative Phone Number: 765-775-5							5100							
If requesting reimbursement to the Participant by wire transfer please provide the following information:														
Bank Name:					·	Ban	k Routing Nu	ımber:						
Account Name:	Account Name: Account Number:													
Loan Information														
Description of work (services, fees, type		is being mad	de	North	side Reg	gional Lift S1	ation and Fo	rce Ma	ain					
Is any part of this cl	aim funded by ar	n alternate f	unding sou	ırce?		,							YES	⊠ NO
If yes, please identi	fy the source and	d amount of	the claim f	funded b	y the al	ternate sou	rce (OCRA, S	AP, Loc	cal Funds):				\$,1
Is any part of this cl	aim funded by th	ne Indiana Br	rownfields	Progran	1?				***************************************				YES	⊠ NO
Has the Participant	paid the request	and is now s	seeking rei	imburse	ment?								YES	⊠ NO
Is any part of this cl	aim a result of a	change orde	er? If yes, p	olease at	tach the	SRF change	e order appr	oval let	tter.				YES	⊠ NO
Are there Green Pro													YES	⊠ NO
If yes, please descri	be:			A										1
Loan Financial Inf	formation													
Original Loan Amou	unt:						· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·	\$	4,200,00	00.00
Total Amount of Pr		nents:										\$	3,811,080.00	
Balance Available After this Disbursement:						382,343.00								
Amount to Contra	actor for this R	equest:										\$	6,577.00	
Is any part of this re	equest a partial o	r final releas	se of retain	age to t	he contr	ractor?					*****		YES	⊠ NO
Contractor Name:	Greeley a	ind Hansen				D	UNS Numbe	r:	04 569 99	949				
Mailing address:	Lockbox 6	619775, PO £	Box 6197											
City: Chicago				State:	IL					ZIP Cod	e: 60	0680-6	197	
Wiring Information:														
Bank Name: Bank Routing Number:														
Account Name: Account Number:														
Retainage Amount for this Request: \$														
Participant requests that the retainage amount be held by SRF:														
Participant requests that the retainage amount be sent to the Participant via check to the mailing address listed above:														
Participant requests that the retainage amount be sent to the following bank:														
Bank Name: Bank Routing Number:														
Account Name: Account Number:														
Total Amount of this Request: \$ 6,577.00														
The undersigned hereby certifies this request for disbursement is, to the best of my knowledge and belief, true and accurate and made in accordance with the conditions of the project agreement, that the certified payrolls received in connection with any enclosed construction invoices are in compliance with the Davis Bacon Act/ US Department of Labor requirements of 29 CFR 5.5(a)(1).														
Authorized Pepresentative Signature: Date: JAN 2 0 2015														
For Internal Use On	lv:							~~~						
Approved By:	• • • •						Date:			GPR		\$		
													L	

Kathy Henderson

From:

David Henderson

Sent:

Wednesday, January 07, 2015 7:28 AM

To:

Kathy Henderson

Subject:

FW: Aged Invoices - North Side Regional LS

Attachments:

0791C02 INV # 408121.pdf; 0791C02 INV # 412112.pdf

Importance:

High

Kathy,

These are the 2 remaining invoices that Greeley has not been paid.

Could you put together an SRF disbursement request, please?

Thanks,

Dave

From: <Teusch>, Joseph <<u>iteusch@greeley-hansen.com</u>>

Date: Tuesday, January 6, 2015 at 8:20 AM

To: David Henderson < dhenderson@westlafayette.in.gov >

Subject: FW: Aged Invoices - North Side Regional LS

Good Morning Dave,

I apologize for the delay. During the delay we did receive payment for Inv. # 420416 on December 30.

Attached are the invoices for the following unpaid invoices:

Inv #	Inv Date	Inv Amount		
408121	07/11/14	\$6,577.16		
412112	09/29/14	\$2,970.14		

Please let me know if you have any questions.



Joseph M. Teusch, P.E. Office Director 7820 Innovation Boulevard, Suite 150 Indianapolis, Indiana 46278 P: 317.924.3380

greeley-hansen.com











100 S. Wacker Drive, Suite 1400 Chicago, Illinois 60606 p 312 558 9000 f 312 558 1986 www.greeley-hansen.com

July 15, 2014

Mr. David Henderson Utility Director City of West Lafayette Wastewater Treatment Utility 500 South River Road West Lafayette, IN 47906

Subject:

North Side Regional Lift Station and Force Main

RPR Inspection Services Beyond Contract Substantial Completion

Invoice No. 408121

Dear David:

The enclosed invoice is for construction administration and inspection services beyond the Contract substantial completion date related to the North Side Regional Lift Station and Force Main project. As you know, the Contractor was notified that as of November 7, 2013 the liquidated damages provision of the Contract is in force until Substantial Completion is reached. As we discussed, the City can pursue reimbursement for construction services in accordance with the Contract Documents. The amounts can be deducted from the Contractor's monthly payment applications. Invoice No. 408121 covers services provided through June 27, 2014 including:

- RPR Onsite Inspection
- Prepared Meeting Agenda & Conducted June 4th Progress Meeting
- Prepared Meeting Agenda & Conducted June 18th Progress Meeting
- Reviewed and Approved Pay Application No. 8
- Drafted Memorandum to Accompany Pay Application to the Board
- Continue to Track and Request 'Approved as Noted' Submittals
- Continued Coordination with RL Turner and City
- Respond to and Monitor Noncompliance Issues
 - Pump Rotation
 - o Insurance Certification

Please call me if you have any questions.

Thank you.

Sincerely,

Greeley and Hansen

Joseph M Teusch

Jmt/img

For customer service, call 312 578 2375.



P.O. Box 6197 Chicago, Illinois 60680-6197 p 312 558 9000 www.greeley-hansen.com

Billing Number.

Invoice Number:

11 INV-0000408121

Invoice Date:

07/11/14

Description:

FOR CONSTRUCTION SERVICES FOR THE NORTHSIDE REGIONAL LIFT STATION AND FORCE MAINS IN ACCORDANCE WITH THE AGREEMENT DATED SEPTEMBER 28, 2009, AMENDMENT NO. 1 DATED MARCH 29, 2010, AMENDMENT NO. 2 DATED JUNE 19, 2012 AND AMENDMENT NO. 3 DATED JUNE 17, 2014

Bill To: CITY OF WEST LAFAYETTE ATTY OF WEST LAFAYETTE ATTY: MR. DAVID HENDERSON UTILITY DIRECTOR 500 SOUTH RIVER ROAD WEST LAFAYETTE, IN 47906

Customer Number:

0791

Project Number: Project Name:

Terms: Due Date: 0791C.02

NORTHSIDE LS & FM 3RD SUB

NET 30 08/10/14

Direct Labor Total Direct Labor

Sub-Consultants Total ODC's

Salary Multiplier Total Multiplier

Invoice Total

Current Incurred Hours:

Remit To: GREELEY AND HANSEN LBX 619776 P.O. Box 6197 CHICAGO, IL 60680-6197 USA

Contract Value \$198,500.00

Cost: Fee: Total:

\$0.00 \$198,500.00

Cumulative Amount Billed:

\$168,643.91

Billing Period From:05/31/14 To:06/27/14

Current						
Amount						
\$2,055.36						
\$2,055.36						
\$0,00						
\$0,00						
\$4,521.80						
\$4,521.80						

Cumulative Amount \$50,638.72 \$50,638.72 \$6,600.00 \$6,600.00 \$111,405.19 \$111,405.19

\$6,577.16

\$168,643.91

48.00

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For customer service, call 312 578 2375.



P.O. Box 6197 Chicago, Illinois 60680-6197 p 312 558 9000 www.greeley-hansen.com

Billing Number:	11	Project Number:	0791C.02		
	101/1-0000408121	Project Name:	NORTHSIDE LS & FM 3RD SUB	Invoice Date:	07/11/14
invoice Number.	1110-0000-00121	Trojunt Harrie.	NONTHORDE EO G. TH. THE CO.		

Non-T&M Labor Supporting Schedule

Group Description:

Total Direct Labor

Group Description:	Total Direct Labor			
Labor		T/S	Current	Current
Cat Desc	Empl/Vendor HEALY, TIMOTHY S	Date	9.00	Amount \$383.58
01 CIVIL- SANITARY ASSOCIATE	HEALY, INVOINT S		. 5.00	φ500.00
01			9.00	\$383,58
01			9.00	\$383.58
00.001070107101	OFFICE OPEON		35.00	1,547.70
22 CONSTRUCTION ENGINEER	GELLER, GREG M		33.00	1,047.70
22			35,00	\$1,547.70

22			35,00	\$1,547.70
23 CONSTRUCTION	MONTGOMERY,		4.00	124.08
TECHNICIAN	BRENDAN M		7.00	
23			4.00	\$124.08
				0.101.00
23			4.00	\$124.08
Direct Labor			48.00	\$2,055.36
Total Direct Labor			48.00	\$2,055.36

0791C.02 408121

DATE	GELLER H	EALY MOI	NTGOMERY (Grand Total
06/02/14	2.50	0.50	NOTE ALTHOUGH TO SECTION OF THE PROPERTY WHEN AND ADDRESS AS AN A SECTION OF THE PROPERTY OF T	3.00
06/03/14	1.00			1.00
06/04/14	6.50	1.50		8.00
06/05/14	1.50			1.50
06/06/14	1.50			1.50
06/09/14	1.00	1.00		2.00
06/10/14	1.00			1.00
06/11/14	0.50			0.50
06/12/14	1.50			1.50
06/13/14	8.00	1.00		9.00
06/18/14	5.00	1.00		6.00
06/19/14		1.00		1.00
06/23/14	4.00			4.00
06/24/14	1.00			1.00
06/26/14	to a change what change come change come change and constructions.	3.00	4.00	7.00
Grand Total	35.00	9.00	4.00	48.00